

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

|   |   |   |  |                                       |  |                  |                   |                   | ــــــــــــــــــــــــــــــــــــــ |                            |                  |  |
|---|---|---|--|---------------------------------------|--|------------------|-------------------|-------------------|--|----------------------------|------------------|--|
|   | CLAIMS AS FILED - PART I  (Column 1) (Column 2) |   |  |                                       |  |                  | SMALL ENTITY TYPE |                   | OR                                     | OTHER THAN SMALL ENTITY    |                  |  |
| U.S   | . NATIONAL                                      | STAGE FEES                                | 7  | nn 1)                                 |  | (Column 2)       | Γ                 | RATE              | FEE                                    | 7                          | RATE             | FEE  |
| BASIC FEE   |   |   | SMALL EN                                     | SMALL ENT. = \$ 150                   |  | GE ENT. = \$ 300 | B.                | ASIC FEE          |  | OR                         |                  |  |
| EXAMINATION FEE   |   |   | Satisfies PCT Article 33(1)-                 |                                       | All other situations =                 |                  | -                 | XAM, FEE          | <b> </b>                               | -                          | ļ                | 300  |
| SEARCH FEE  |   |   | (4) = \$50/\$100<br>U.S. is ISA = \$50/\$100 |                                       | \$ 100 / \$ 200 All other situations = |                  | -                 |                   |  | -                          | EXAM. FEE        | 200  |
|   |   |   |  | ALL other countries = \$ 200 / \$ 400 |  | \$ 250 / \$ 500  |                   | EARCH FEE         |  |                            | SEARCH FEE       | 440  |
| FEE FOR EXTRA SPEC. PGS.                                      |   |   | 17 min                                       | / // minus 100 =                      |  | / 50 =           |                   | X \$ 125 =        |  |                            | X \$ 250 =       |  |
| TOTAL CHARGEABLE CLAIMS                                       |   |   | 2 mi   | 2 minus 20 = *                        |  |                  |                   | X \$ 25 =         |  | OR                         | X \$ 50 =        | ·  |
| INDEPENDENT CLAIMS  |   |   | minus 3 =                                    |                                       |  |                  |                   | X \$ 100 =        |  | OR                         | X \$ 200 =       | <del>                                     </del> |
| MULT  | TIPLE DEPEN                                     | IDENT CLAIM PR                            | ESENT  |                                       |  |                  |                   | + \$ 180 =        |  | OR                         | + \$ 360 =       |  |
| * If t  | he difference                                   | e in column 1 is                          | less than zen                                | o, enter "0"                          | in cc                                  | olumn 2          | _                 | TOTAL             |  | OR                         | TOTAL            | 900  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) |   |   |  |                                       |  | _                | SMALL ENTITY      |                   |  | OTHER THAN<br>SMALL ENTITY |                  |  |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ,  | HIGHE<br>NUMBI<br>PREVIOU<br>PAID F   | BER<br>USLY                            | PRESENT<br>EXTRA |                   | RATE              | ADDI-<br>TIONAL<br>FEE                 |                            | RATE             | ADDI-<br>TIONAL<br>FEE                           |
| NOW !   | Total   | *   | Minus  | **                                    |  | =                |                   | X \$ 25 =         |  | OR                         | X \$ 50 =        |  |
| AME   | Independent                                     | *   | Minus  | ***                                   |  | =                | >                 | (\$ 100 =         |  | OR                         | X \$ 200 =       |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |  |                                       |  |                  | 1                 | \$ 180 =          |  | OR                         | + \$ 360 =       |  |
|   |   |   |  |                                       |  |                  | TC                | TAL ADDIT.<br>FEE |  | OR                         | TOTAL ADDIT. FEE |  |
|   |   | (Column 1)                                | <del></del>                                  | (Column                               |  | (Column 3)       |                   |                   |  |                            |                  |  |
|   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | ER<br>JSLY                             | PRESENT<br>EXTRA |                   | RATE              | ADDI-<br>TIONAL<br>FEE                 |                            | RATE             | ADDI-<br>TIONAL<br>FEE                           |
| AMENDME   | Fotal .   | *   | Minus  | **                                    |  | =                | ,                 | X \$ 25 =         |  | OR                         | X \$ 50 =        |  |
| i i   | ndependent                                      | *   | Minus  | ***                                   |  | =                | ×                 | \$ 100 =          |  | OR                         | X \$ 200 =       |  |
| ₹L  |   |   | FIRST PRESENTATION OF MULTIPLE DEPENDENT C   |                                       |  |                  |                   | 0.400             |  | أحدا                       |                  |  |
| `   | FIRST PRESE                                     | ENTATION OF M                             | ULTIPLE DEPL                                 | ENDENT CL                             | LAIM                                   |                  |                   | \$ 180 =          | ĺ                                      | OR                         | + \$ 360 =       |  |

ff the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.